	MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)								09/787389 FILING DATE					
	,						LAIM	S						
	AS	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		•		•	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	-	T
1		ļ					ĺÌ	51			1	DEP.	IND .	DE
2	 	1						52			 	 	┼── -	+-
3		1						53			 	 	┼	┼—
4		11_					İ	54			 		 	+
5		<u> </u>						55			 	 		┼
6.	╂——	 					Ī	56			 		 - -	+-
7	╄	 	· · · ·					57			 		 -	╁─
8	╂──	 						58					 	┼
9	╂						[59			i — —	<u> </u>	 - -	╁
10		-						60					 -	
11								61						├─
12	 	+					ŀ	62				 	 	
13	┨──	 				·		63					 	
14	 	 					· [64						†
15	┼	 					ſ	65					 	
16	┼	 			L			66					 	\vdash
17 18	 	├ ──—			·			67					 	
19	1	 						68					 	
20	╁──						1	-69						
21	╁─┈						L	70						
22	 	 					L	71						
23	 						L	72						-
24	 	 						78						
25	 							74						
26							.	75						
27	 						Ļ	76						
28	<u> </u>						-	77						
29							Ļ	78						
30							-	79						
31							.	80						
32							ŀ	81						
33							- -	82						
34							ŀ	83						
35							.	84						
36					 		· -	85						
37							-	86		:	·			
38				{		-' 	L	87		I]			
9							1	88						
0							Ļ	89						
1							-	90						
2				+			-	91				I		
3			-+	 			 -	92			I			
4					┷┷┼		<u> </u>	93			I	I		
							<u> </u>	94]			
				+			-	95						
		 	-+	 -			_	96				T		
3				+			-	97						
9							Ļ.	98						
\Box							L	99						
AL	-1/	-, 1		-			H	100						
AL		⊦ لي		_1		1 1	Li	OTAL ND.		11	Ī	, 7		1
					~	-		OTAL EP.		 ∤		ل		ل
AL IMS	4							OTAL LAIMS			<u>-</u>	SING PARTY		1588. E
1360	(3-78)				ISED POR			LAIMS	#		b			经 重